

PTO/SB/22 (09-06)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PETITION FOR EXTENSION OF TIME UNDER 37 FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 20	Docket Number (Optional) C1039.70073US00							
Application Number 10/743,625-Conf. #9	Filed [	December 22, 2003						
For IMMUNOSTIMULATORY NUCLEIC ACID MOLECULES								
Art Unit 1645		Examiner	N. M. Minnifield					
This is a request under the provisions of 37 CFR 1.136 identified application.								
The requested extension and fee are as follows (check	time period desi							
X One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity F	<u>ee</u> \$ 120.00					
		•						
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$					
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$					
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$					
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$					
Applicant claims small entity status. See 37 CF	R 1.27.							
X A check in the amount of the fee is enclosed.								
Payment by credit card. Form PTO-2038 is atta	ached.							
The Director has already been authorized to ch	arge fees in this a	opplication to a De	eposit Account.					
Deposit Account Number 23/2825  I am the applicant/inventor. assignee of record of the entire Statement under 37 CFR 3. attorney or agent of record. Reattorney or agent under 37 CFR	interest. See 37 73(b) is enclosed gistration Number 1.34.	(Form PTO/SB/						
Registration number if acting und	er 37 CFR 1.34		•					
Signature		A	pril 5, 2007					
Signature Helen C. Lockhart		(61	Date 2000					
Typed or printed name			7) 646-8000 ohone Number					
NOTE: Signatures of all the inventors or assignees of record of the enthan one signature is required, see below.	tire interest or their repre	esentative(s) are require	d. Submit multiple forms if more					
Total of 1 forms are submit	ted.							
			-					
Certificate of Mailing Under 37 CFR 1.8(a)  I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  Dated: Signature: Signature: (Sylvana Householder)								
11	172099.1							

PTO/SB/17 (07-06)

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Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. APR 1.0 2007 Complete if Known Effective on 12/08/2004. uant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/743,625-Conf. #9416 FEE TRANSMITTAL December 22, 2003 Filing Date Arthur M. Krieg First Named Inventor For FY 2006 **Examiner Name** N. M. Minnifield

Applicant claims small	entity status. S	See 37 CFR 1.2	7	Art Unit		1645			
TOTAL AMOUNT OF PAY	VIENT	(\$) 120.00		Attorney Docket	No.	C1039.70073US00			
METHOD OF PAYMENT	(check all the	hat apply)							
x Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.									
For the above-identi			•	••			20110, 1 10	<u> </u>	
Charge fee(s)	indicated bel	low		Charg	e fee(s) ir	ndicated below, ex	cept for t	he filing fee	
x   Charge any ad fee(s) under 3			ments o	x Credit	any over	payments			
FEE CALCULATION									
1. BASIC FILING, SEARCH	FILING	G FEES Small Entity	SEA	ARCH FEES Small Entity		NATION FEES Small Entity	<b>-</b>	D-14 (A)	
Application Type Utility	Fee (\$) 300	Fee (\$) 150	Fee (\$		Fee (\$)	100	Fees	Paid (\$)	
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES	200		ŭ	Ū	Ů	ŭ		Small Entity	
Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20 (includi	,						50	25	
Each independent claim over 3 (including Reissues) 200 100								100	
Multiple dependent claims 360 180									
Total Claims									
-= x = Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)									
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
	tra Sheets			dditional 50 or fra	ction there	eof Fee (\$)	<u>Fee</u>	Paid (\$)	
- 100 = /50 (round up to a whole number) x =									
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00									
SUBMITTED BY	7	00							
Signature   HOVO		EX.		Registration No.	20.240	Talanhana	(647) 64	6 8000	

SUBMITTED BY		_ (			Λ	1						
Signature	h	Qχ	$\mathcal{U}_{\lambda}$	Nell	K)	lau	1	Registration No. (Attorney/Agent)	39,248	Telephone	(617) 646-8000	
Name (Print/Type)	Hele		. Lo	ckhart						Date	April 5, 2007	

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Dated: Qpr:15,2007	Signature:	O Nuclei ( O L Sylvana Householder)					